

License Transfer Application for the Year _____

(see current Fee Sheet)

*NOTE: Current Plastic License Card must be returned with this application.

| Owner(s) of Transferring License ID# | | |
|---|------------|-----------------|
| Last Name | First Name | Initial |
| Permanent Street Address | | Post Office Box |
| City | State | Zip Code |
| Permanent Phone Number () | | |
| License Being Transferred (License Type & Number) | | |

I, _____ authorize transfer of this license to the person shown below.

Subscribed and sworn before me this _____ day of _____, _____,

Notary public in and for the state of _____ residing at _____

| New Owner of License | | | | | | |
|---|-----|------------|------|--|-----------------|-------------------|
| Last Name | | First Name | | Initial | | |
| Permanent Street Address | | | | | Post Office Box | |
| City | | State | | Zip Code | | |
| Permanent Phone | | | | Social Security or UBI Number (required) | | |
| Primary Operator of Transferred License | | | | | | |
| Last Name | | First Name | | Initial | | Operator ID# |
| Birthdate (M/D/Y) | Sex | Hair | Eyes | Weight | Height | |
| Alternate Operator(s) | | | | | | |
| Last Name | | First Name | | Initial | | Birthdate (M/D/Y) |
| | | | | | | Operator ID# |
| Last Name | | First Name | | Initial | | Birthdate (M/D/Y) |
| | | | | | | Operator ID# |

Make fees payable to State Treasurer
License will expire December 31st of Issuance Year

Mail Applications Directly to:
Department of Fish and Wildlife
License Division
600 Capitol Way N
Olympia WA 98501-1091

Office Location:
1111 Washington St. S.E. Olympia WA
Phone Number: (360) 902-2464 *TDD (360) 902-2207
Fax (360) 902-2945

This is a public document. Please be advised that the information submitted may be shared with other government agencies.

| Department Use Only | | |
|---------------------|-----------------|-----------------|
| License Number | | Card Returned |
| | | Card Issued |
| License Type | | Payment Receipt |
| Resident | Non-Resident | |
| Vessel Registration | | |
| Buoy Brand No. | Harvester No. | |
| Total Fee | Amount Received | |

| Vessel License is Being Designated to | | | |
|--|---|--|---------------|
| Vessel Name | | State or Document Number | |
| Hull Identification Number | | Home Port Location | |
| Length | Beam | Engine Type | Horse Power |
| Net Tonnage | Gross Tonnage | Year Purchased | 10Inch Number |
| Radar <input type="checkbox"/> Yes <input type="checkbox"/> No | Loran <input type="checkbox"/> Yes <input type="checkbox"/> No | Fathometer <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Name of Vessel Owner(s) | | | V.O.'s ID# |
| Address | | | Phone Number |
| <input type="checkbox"/> I have been a resident of Washington for the previous 90 days and am not licensed as a resident in any other state. <input type="checkbox"/> I am not a resident of Washington State. <input type="checkbox"/> I am a member of a recognized treaty indian tribe _____. | | | |
| I hereby certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct. Providing false information may invalidate this license. | | | |
| (Signature of New License Owner) | | (Date) | |
| Signed at (Place) | | | |
| Signature of new owner indicates that the information on reverse side of this form has been read and understood. | | | |

Transfer Instructions

Commercial fishing licenses may be transferrable. License ownership is non-transferrable unless otherwise set forth by Legislative Statute. Moratoria licenses vary in transfer rights. Call the License Division at (360) 902-2464 for further information.

Some limited entry licenses have a landing requirement to qualify that license for renewal. Landing history remains with individual licenses. Licenses must meet landing requirements.

All fishery licenses expire at the end of each calendar year. Only a license that has been renewed for the current license year can be transferred.

The completed transfer application must be submitted to the Washington Department of Fish and Wildlife along with the following:

- (A) Transfer Fee
- (B) Nonresident license fee if residency is changed by transfer
- (C) Designated vessel decals from vessel if this transfer is removing the only license designated to that vessel. (Peel off vessel and send to department even if not intact)
- (D) Current Plastic License card must be returned.
- (E) Current document or registration papers from vessel license is being designated to if vessel is not currently designated on another license.
- (F) Notarized signatures of all owners as shown in WDFW records. (If the owner is a corporation, all officers listed in the corporation papers on file in this office must sign and be notarized.)
- (G) Corporate papers if owner receiving license has not submitted a copy for our records.
- (H) Only the following licenses are transferable:

| | | |
|--------------------|----------------------------|--------------------------------|
| Salmon Purse Seine | Salmon Delivery | Dungeness Crab (Puget Sound) |
| Salmon Gill Net | Ocean Pink Shrimp Delivery | Dungeness Crab (Coastal "A") * |
| Salmon Troll | Reef Net | Herring Gill Net |
| Sea Urchin | Salmon Charter | Herring Lampara |
| Sea Cucumber | Whiting (Puget Sound)* | Herring Purse Seine |
| | | Herring Dip Bag Net |
| | | Herring Drag Seine |

*Transferable with limitations.

Notification Clause

The Washington Department of Fish and Wildlife receives federal financial assistance through the federal aid in fish and wildlife restoration acts. Any person who believes they have been discriminated against because of race, color, national origin, age or handicapping condition in a program, activity, or facility operated by the department, should write to: USFWS, Department of Interior, 18th & C Streets NW, Washington DC 20241. The complaint must include your name, address, phone number, date of incident, and reason you believe you have been discriminated against.